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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 09/961,532 09/24/2001 PAT 6,912,283
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KMD 11/22/2005

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/05/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	FL	24	23	3
Verified and Acknowledged	Examiner's Signature <i>Dr. O'Hagan</i>	Initials KMD		

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TITLE

Multi-media communication management system supporting selectable appliance modules

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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